

Request for Public Records

| Request Date: | | | |
|---|----------------------------|-----------------|----------------|
| Requestor Information (Please provide enough conta | act information so that yo | our request can | be delivered): |
| Name (optional): | | | |
| Phone Number: | Email: | | |
| Street Address: | | | |
| City: | | | |
| Fax Number: | | | |
| Type of record requested (Describe in detail the specific, include the Record Schedule Numbers a Schedule if known.): | | | |
| | | | |
| | | | |
| | | | |
| Date range of records requested: | | | |
| Format Requested: | | | |
| Paper Electronic | Ot | her | |
| Requested Method of Delivery: | | | |
| Email Mail Fax CD_ | Pickup in pers | on (| Other |
| Number of Copies Requested: | | | |
| Notify me of duplication costs exceeding \$ | | | |
| | | | |
| Signature (optional): | | | |
| Greene County Transit Board Request for Public Website: www.co.greene.oh.us/greenecats Email: info@greenecats.org | Records forms can be | e submitted | at |

Mail or In Person: 2380 Bellbrook Avenue, Suite A, Xenia, Ohio 45385

Fax: (937) 708-8320

| For office use only: | | |
|--|--|--|
| Date of request: Format request was received: | | |
| Name of requestor: | | |
| Office/Department where record originates: | | |
| Type of records requested: | | |
| Format of records requested: Requested method of delivery: | | |
| Date acknowledgement sent: By Whom: | | |
| Date public records request fulfilled/delivered: By Whom: | | |
| | | |